

IN THE CIRCUIT COURT OF MONROE COUNTY, MISSISSIPPI

JERRY BOWEN AND CHERYL BOWEN

PLAINTIFFS

VS

CAUSE NO.: CV2010-252-PM

AMORY HMA, LLC d/b/a GILMORE MEMORIAL
REGIONAL MEDICAL CENTER, HEALTH MANAGEMENT
ASSOCIATES, INC., GILMORE MEMORIAL HOSPITAL, INC.
PATRICK ANDERSON MURPHREE, M.D. AND
JOHN DOE DEFENDANTS 1-5

DEFENDANTS

**RESPONSES TO INTERROGATORIES AND REQUESTS FOR PRODUCTION OF
DOCUMENTS PROPOUNDED TO PLAINTIFF**

COMES NOW, the Plaintiff, Jerry Bowen by and through his attorney of record and files this, his Responses to Interrogatories and Requests for Production of Documents, and would show the following, to-wit:

INTERROGATORIES

INTERROGATORY NO. 1: State the address of each residence at which you have lived during the last ten (10) years, and the date inclusive of each.

RESPONSE 1: 50 Nita Lake Road, Fulton, Ms 38843 (1987-2004)
895 Bowen Road, Fulton, Ms 38843 (2004-Present)

INTERROGATORY NO. 2: Please describe your complete employment history, including military service, prior to December, 6, 2007, including, as to each employment relationship and/or military service, the name and address of each, the dates of each employment or service, the type of work performed, the names of your supervisor(s) and co-worker(s), your rate of pay and the reason for the termination of each such employment relationship.

RESPONSE 2: Bowen Construction; 895 Bowen Road, Fulton, Ms 38843; 1989-2010; Self-Employed; Built Houses; Business closed in July 2010; Mr. Bowen has not participated in the physical labor of his business after December 2007 because of his injury.

INTERROGATORY NO. 3: Please describe in detail your employment and attempts to obtain employment since December 6, 2007, including the name and address of each employer which whom you have worked and/or applied for employment, the date you were hired and/or applied for employment, state whether your application was accepted or rejected, if rejected, the reasons and, if accepted, your job duties, rate of pay, including raises, and hour worked each week.

RESPONSE 3: Plaintiff has not been able to work, and has not sought employment.

INTERROGATORY NO. 4: If you have filed any suit or made any claim, formally, informally or otherwise, for damages or any sum of money against any party, with the exception of the present claim, please state the names and addresses of the party(s) against whom each suit was filed or claim made, the nature of each suit or claim, the court in which each was made, the style of the case and the cause number, and state who each was concluded, such as settlement, jury verdict, etc.

RESPONSE 4: Workers' Compensation Case; December 2007; Jerry Bowen vs. Bowen Construction and 21st Century Security Insurance Company and AIG Servicers; MWCC No.: 0801912; Settlement--\$51,000.00.

INTERROGATORY NO. 5: Please describe your educational background including the highest grade completed and/or date passed a high school equivalency examination, if applicable.

RESPONSE 5: Plaintiff, Jerry Bowen received his high school diploma in 1970 from Itawamba Agriculture High School; 1972-Associates of Arts Degree from Itawamba Community College in Fulton, Mississippi; and Bachelor Degree in Accounting from Mississippi State in December of 1974.

INTERROGATORY NO. 6: Please describe all vocational or occupational training programs in which you have been involved.

RESPONSE 6: Plaintiff has not been involved in any vocational or occupational training programs.

INTERROGATORY NO. 7: With regard to the physicians, chiropractors or other medical specialists who have attended or treated you during the past ten (10) years for any mental or physical illness or condition, please state the name and business address of each such physician or specialist, the treatment performed by each such physician or specialist, and the date and location of any such treatment(s).

RESPONSE 7: 1.) Plaintiff broke his arm in 2004 and was treated by Dr. Kenneth Grinspun who has moved his practice to Memphis since this injury.

2.) Plaintiff injured his shoulder in December 2007 and was treated by:

Dr. John E. Turba, Amory Sports Medicine & Orthopaedics; 1107 Earl Frye Boulevard, Suite 1;
Amory, MS 38821

Semmes Murphy Clinic--Dr. Muhlbauer; 6325 Humphreys Blvd, Memphis, TN 38120

Dr. Patrick Anderson Murphree, M.D.; 1105 Earl Frye Boulevard; Amory, MS 38821;
recently moved to Madisonville, Kentucky;

North Mississippi Neurosurgical Services; Dr. Hunt Bobo; Longtown Medical Park; 4381 South Eason Blvd., Ste 302; Tupelo, Ms 38801.

Tupelo Neurology Clinic; Dr. Newell; 609 Brunson Dr, Tupelo, MS 38801

Norwood Clinic; Dr. H. Evan Zeiger, Jr.; 1528 Carraway Blvd., Birmingham, AL 35234

Gilmore Sports Wellness Center; 1111 Earl Frye Blvd., Amory, MS; 38821; Physical Therapy.

Michael Coleman Graeber MD, 971 Lakeland Dr, Jackson, MS 39216

INTERROGATORY NO. 8: If, during the past ten (10) years, you have been hospitalized or confined to any hospital or other institution for the treatment of any mental or medical illness or condition, please state the name and address of each such hospital or other institution in which you were hospitalized or confined, the nature of each mental or medical illness or condition for which you were hospitalized or confined, a description of the treatment you received, and the dates of each hospitalization or confinement.

RESPONSE 8: Plaintiff was hospitalized on December 6th, 2007 at Gilmore Memorial Regional Medical Center to have rotator cuff surgery on his right shoulder.

INTERROGATORY NO. 9: If you or your attorney are aware of the existence of any written or recorded statements made by or for any party or witness, please state the name and address of each person making the statement, the date the statement was made or taken, the name and address of the person who took the statement, and the name and address of the person in possession of any such statement.

This interrogatory is not intended to seek production of any written or recorded statements.

RESPONSE 9: Plaintiff is unaware of any written or recorded statements.

INTERROGATORY NO. 10: If you have had any conversation or communication with any of the Defendants, or any of their former or current employees, agents, servants, or representatives, relevant to any matter alleged in your Complaint, any of the denials or defenses

of the Defendants, or any other matter relevant to the issues herein, please identify each such person, state the date of each communication, the substance of each communication, the persons involved, present or who have knowledge of each conversation, and state whether any documents exist which memorialize or summarize each conversation.

RESPONSE 10: None

INTERROGATORY NO. 11: Please state the name, address and telephone number of any person having knowledge of any discoverable matter pursuant to Rule 26(b)(1) of the Mississippi Rules of Civil Procedure and every person you intend to call as a witness at trial.

RESPONSE 11: Objection. Plaintiff objects to Interrogatory No. 11 as being overly broad. Without waiving said objection Plaintiff responds: Jerry Bowen, Cheryl Bowen and all physicians listed in response to Interrogatory No. 12.

INTERROGATORY NO. 12: Identify each person whom you intend to call as an expert witness in the trial of this cause and state the subject matter upon which each is expected to testify, the substance of the facts and opinions of each, the basis for each opinion, including the identity of every document, medical record or text on which they rely, and a summary of the grounds for each opinion.

RESPONSE 12: Plaintiff will call the following as an expert witness:

Robert Scott Harris, M.D.
Emory University Hospital
Department of Anesthesiology
1364 Clifton Road, N.E.
Atlanta, GA 30322
Phone: 404-778-3900

Dr. Harris is a licensed physician board certified in the field of anesthesiology (2002 American Board of Anesthesiology Certification No. 34768). Dr. Harris is expected to testify as expert in the field of anesthesiology on behalf of the Plaintiff Jerry Bowen.

Dr. Harris is expected to give opinions based upon a reasonable degree of medical certainty that the appropriate standard of care when administering an interscalene block in Monroe County, Mississippi (the location of Gilmore Memorial Medical Center) required the following:

1. Informed consent, verbal and written
2. Knowledge of the pertinent anatomy
3. Administration of the proper drug and dosage
4. Demonstration of and proficiency with the accepted technique
5. Postoperative follow-up visit by the anesthesiologist or a qualified departmental representative (as recognized by the Joint Commission on Accreditation of Healthcare Organizations)

Dr. Harris is expected to testify based upon a reasonable degree of medical certainty that the Defendants failed to obtain proper written or verbal consent from Jerry Bowen. Dr. Harris is expected to testify based upon a reasonable degree of medical certainty that the Defendants failed to do a postoperative follow-up evaluation following Jerry Bowen's December 6, 2007 interscalene block.

Dr. Harris is expected to testify that the interscalene block administered by Dr. Murphree caused or contributed to Jerry Bowen suffering a brachial plexus injury. Dr. Harris' opinion is based upon a review of medical records, especially the April 25, 2008, EMG study which shows re-innervation.

Dr. Harris' opinions are based on, but not limited to, a review of the subject complaint, Jerry Bowen's medical records from Dr. Turba, Gilmore Memorial Medical Center, Dr. Murphree, Dr. Bobo, Dr. Muhlbauer and Dr. Zeiger.

Plaintiff may call the following as an expert witness:

Zvi Herschman, M.D.
346 Wilson Street
West Hempstead, NY 11552
Phone (516) 486-7384

Dr. Herschman is a licensed physician board certified in the field of anesthesiology. Dr. Herschman is expected to testify as expert in the field of anesthesiology on behalf of the Plaintiff Jerry Bowen.

Dr. Herschman is expected to give opinions based upon a reasonable degree of medical certainty that the appropriate standard of care when administering an interscalene block in Monroe County, Mississippi (the location of Gilmore Memorial Medical Center) required the following:

1. Informed consent, verbal and written
2. Knowledge of the pertinent anatomy
3. Administration of the proper drug and dosage
4. Demonstration of and proficiency with the accepted technique
5. Stopping administration of anesthesia when patient demonstrates severe pain and discomfort
6. Postoperative follow-up visit by the anesthesiologist or a qualified departmental representative (as recognized by the Joint Commission on Accreditation of Healthcare Organizations)

Dr. Herschman is expected to testify based upon a reasonable degree of medical certainty that the Defendant(s) failed to properly act and/or stop administration of the interscalene block when Jerry Bowen exhibited signs of severe pain and discomfort; failed to properly act and/or stop administration of the interscalene block when Jerry Bowen's right arm began jerking violently;

failed to properly administer the interscalene block causing the needle to impale the brachial plexus during numerous needle insertions; failed to properly administer the interscalene block causing the needle to impale the brachial plexus then injecting anesthesia into the brachial plexus; failed to obtain proper informed consent from Jerry Bowen prior to the interscalene block; failed to do a postoperative follow-up evaluation following Jerry Bowen's December 6, 2007 interscalene block.

Dr. Hershman is expected to testify that the interscalene block administered by Dr. Murphree caused or contributed to Jerry Bowen suffering a brachial plexus injury.

Dr. Hershman's opinions are based on, but not limited to, a review of the subject complaint, Jerry Bowen's medical records from Dr. Turba, Gilmore Memorial Medical Center, Dr. Murphree, Dr. Bobo, Dr. Muhlbauer and Dr. Zeiger.

Plaintiff may call any of his treating physicians to give testimony regarding causation and damages. Dr. Turba, Dr. Bobo and Dr. Muhlbauer are all expected to testify that the interscalene block administered by Dr. Murphree caused Jerry Bowen to suffer a brachial plexus injury. Dr. Turba, Bobo and Muhlbauer are also expected to testify as to Plaintiff's brachial plexus injury caused him to suffer pain and suffering, loss of use of his upper extremity, mental depression, and other physical damages. Plaintiff reserves the right to supplement this interrogatory.

INTERROGATORY NO. 13: Identify each document you will or may seek to introduce as evidence or will otherwise rely on at the trial of this cause, including the title, author, publisher, date and page numbers of each medical text, treatise, article or study to be used in direct examination at said trial.

RESPONSE13: Plaintiff may use the documents produced on the compact disc attached hereto that contains the following:

- a. Dr. Turba's file

- b. Gilmore Memorial's file
- c. SMC Humphreys Office note
- d. 2002-2009 tax records
- e. Dr. Harris CV
- f. Dr. Herschman CV
- g. Mississippi Worker's Compensation Commission Form B-31

INTERROGATORY NO. 14: State whether or not any physician, psychiatrist or other medical provider has assigned you any physical or mental disability within the last ten (10), and, if so, state the percentage of disability, date said disability was awarded, the physician awarding said disability and the specific factual and medical reasons for each disability.

RESPONSE 14: Semmes Murphy Clinic--Dr. Muhlbauer; 6325 Humphreys Blvd, Memphis, TN 38120 assigned an impairment rating of 22% to the whole person on 06/22/2009. Dr. Muhlbauer's specific factual and medical reasons for assigning disability are provided in his medical records.

INTERROGATORY NO. 15: State the factual basis for every act or omission of Amory HMA, (or any person you contend was, or is, an agent, representative or employee of Amory HMA), which you contend was negligent, including, but not limited to, why each act or omission was negligent, what should have been done/not been done that was not done/was done, and the facts, documents and identity of each witness in support thereof.

RESPONSE 15: See expert opinions in response to Interrogatory No. 12.

INTERROGATORY NO. 16: Do you contend that this Defendant, or anyone you contend is an agent, representative or employee of this Defendant, has, at any time, made any admissions of liability to you or anyone else to your knowledge; if so, please identify each agent,

representative or employee who made each alleged admission, and to whom, where and when said admission was made and identify each and every witness and document supporting same.

RESPONSE 16: None Plaintiff is aware of at this time.

INTERROGATORY NO. 17: Identify every person and document, including medical records, which you contend supports the allegation that your “right arm symptoms were the result of the interscalene block administered by Dr. Murphree.”

RESPONSE 17: See Dr. Turba’s file attached hereto. Specifically, Doctor John E. Turba’s notes of May 20th, 2008 states that there was “no question that the injury came from the interscalene block.” Also Dr. Hunt Bobo’s correspondence dated April 10, 2009; Final diagnosis would be injection injury to the right brachial plexus.

INTERROGATORY NO. 18: Specifically identify every document which you contend supports your allegation that your “right arm symptoms were the result of the interscalene block administered by Dr. Murphree.”

RESPONSE 18: See response to Interrogatory No. 17.

INTERROGATORY NO. 19: Identify every person you contend will support the allegation that your “right arm symptoms were the result of the interscalene block administered by Dr. Murphree.”

RESPONSE 19: See Response to Interrogatory No. 12.

INTERROGATORY NO. 20: Specifically identify every document which you contend supports the allegation that any of the Defendants violated the applicable standard of care with regard to the treatment provided to Plaintiff Jerry Bowen.

RESPONSE 20: Plaintiff will rely upon expert testimony.

INTERROGATORY NO. 21: Identify every person you contend will support the allegation that your “right arm symptoms were the result of the interscalene block administered by Dr. Murphree.”

RESPONSE 21: See Response to Interrogatory No. 12.

INTERROGATORY NO. 22: Identify every person and document, including medical records, which you contend supports the each of the allegations contained in Paragraph 18 of your Complaint.

RESPONSE 22: Expert testimony will show that Defendant failed to provide informed consent. Furthermore, Jerry Bowen was unaware that the interscalene block was not necessary for the operation and would not have had the interscalene block.

INTERROGATORY NO. 23: Identify every person and document, including medical records, which you contend supports the each of the allegations contained in Paragraph 19 of your Complaint; including each allegation contained in subparagraphs a through f.

RESPONSE 23: Person’s listed in response to Interrogatory No. 11 and 12 will provide testimony to support paragraph 19 of the complaint.

INTERROGATORY NO. 24: Identify every person and document, including medical records, which you contend supports the each of the allegations contained in Paragraph 20 of your Complaint.

RESPONSE 24: See Response to Interrogatory No. 23.

INTERROGATORY NO. 25: Categorize and describe each element of damage for which you are seeking recovery against the Defendants, including, but not limited to, each item of damage contained in the second Paragraph 20 of your Complaint, including subparagraphs a

through e, and specify the amount you are seeking for each and the identity of each witness or document upon which you will rely to support same at trial.

- | | |
|---|----------------------|
| a. Past medicals/worker's compensation lien: | \$128,201.08 |
| b. Future medicals: | Unknown at this time |
| c. Loss of Wages: | Ongoing/undetermined |
| d. Pain and suffering/loss of enjoyment of life/
Emotional distress: | \$500,000.00 |

Plaintiff will call persons listed in response to Interrogatories 11 and 12 to support damages.

INTERROGATORY NO. 26: Categorize and describe each element of damage for which you are seeking recovery against the Defendants, including, but not limited to, each item of damage contained in the second Paragraph 21 of your Complaint, and specify the amount you are seeking for each and the identity of each witness or document upon which you will rely to support same at trial.

RESPONSE 26: Loss of consortium	\$500,000.00
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Plaintiffs will testify to damages on loss of consortium.

INTERROGATORY NO. 27: If you refuse to produce any document on the grounds that it constitutes work product, was prepared in anticipation of litigation for trial, or was confidential/privileged and is, therefore, protected under Mississippi Rules of Civil Procedure 26, for each such document:

- (a) Identify its author (for photographs or electronic recordings, identify the person who operated the camera or electronic equipment);
- (b) State the subject matter of the document;
- (c) State the date it was prepared or produced; and,

(d) State its custodian.

RESPONSE 27: Not Applicable

II. DOCUMENTS AND THINGS REQUESTED

REQUEST NO. 1: A copy of all documents Plaintiff will introduce into evidence at the trial of this cause or that will be used during any portion of the trial of this cause.

RESPONSE NO. 1: See attached compact disc that contains the following documents:

- a. Dr. Turba's file
- b. Gilmore Memorial's file
- c. SMC Humphreys Office note
- d. 2002-2009 tax records
- e. Dr. Harris CV
- f. Dr. Herschman CV
- g. Mississippi Worker's Compensation Commission Form B-31

REQUEST NO. 2: All bills, statements, invoices and/or the representations of all expenses allegedly incurred by Plaintiff as a result of the matters described in the Plaintiff's Complaint.

RESPONSE NO. 2: See attached Mississippi Worker's Compensation Commission Form B-31

REQUEST NO. 3: Any and all documents, memoranda, writings, etc. in any way pertaining to the allegations of the Plaintiff's Complaint that Plaintiff does not intend to introduce into evidence.

RESPONSE NO. 3: None

REQUEST NO. 4: Curriculum Vitae of each person identified in Plaintiff Jerry Bowen's Answers to Defendant, Amory HMA, LLC's First Set of Interrogatories as an expert or potential expert witness.

RESPONSE NO. 4: See attached CV's for Dr. Robert Scott Harris and Dr. Zvi Herschman.

REQUEST NO. 5: All documents identified in Plaintiff Jerry Bowen's Answers to Defendant, Defendant, Amory HMA, LLC's First Set of Interrogatories.

RESPONSE NO. 5: See Attached.

REQUEST NO. 6: Any and all documents containing statements which you, or your representatives, have taken, whether reduced to writing or in the form of tape or other recordings, from any witness or potential witness including this Defendant and anyone you contend to be an agent, servant or employee of this Defendant.

RESPONSE NO. 6: None available.

REQUEST NO. 7: The records, files, notes, memoranda, charts, reports, x-rays, evaluations and other documents of all physicians, and other medically trained and licensed persons, who attended, examined, or treated Plaintiff for any injury, illness or medical condition for the ten (10) years.

RESPONSE NO. 7: See attached. Response No.1.

REQUEST NO. 8: The records, files, notes and charts representing every hospitalization or institutionalization of Plaintiff for the ten (10) years.

RESPONSE NO. 8: See attached Response No. 1.

REQUEST NO. 9: Any and all notice, proofs, applications, forms, reports, statements, cards, letters, correspondence and other documents related to any claim(s) filed by Plaintiff, or any other person, with any insurance company, program, funds, or governmental agency, on account of, as a result of, or relative to the claims and damages in your Complaint.

RESPONSE NO.9: Mississippi Worker's Compensation Commission Form B-31

REQUEST NO. 10: An executed Medical Authorization, (as per the attached original), listing all physicians and hospitals identified in Plaintiff Jerry Bowen's Answers to Defendant, Amory HMA, LLC's First Set of Interrogatories.

RESPONSE NO. 10: See attached.

REQUEST NO. 11: Any and all medical literature, texts, treatises, articles, documents, periodicals, memorandums, notes, etc., upon which you will rely at trial or which you have consulted in preparation therefore, to prove the allegations contained in the Complaint against Defendant, Amory HMA, LLC.

RESPONSE NO. 11: See Attached Medical Files.

REQUEST NO. 12: If any claim for lost wages or lost wage earning capacity is being made, then produce the federal and state income tax returns, including W-2's or similar forms, filed, individually, jointly or otherwise, by or on behalf of Plaintiff, for the tax years 2003 to the present.

RESPONSE NO. 12: See attached Tax Returns for years 2002, 2003, 2006, 2007, 2008, 2009.

REQUEST NO. 13: The personnel file of Plaintiff for any and all employment from January 1, 2003 to the present.

RESPONSE NO. 13: None available Plaintiff has been self-employed since 1989.

REQUEST NO. 14: Please execute the Authorization to Release Employment Information, attached hereto, and produce said release.

RESPONSE NO. 14: See Attached.

REQUEST NO. 15: Any and all documents relative to any payments, subrogation, and assignment of other lien interests related to the claim herein.

RESPONSE NO. 15: See attached Mississippi Worker's Compensation Commission Form B-31

REQUEST NO. 16: Any and all documents reviewed and prepared by each expert witness designated in responses to Defendant, Amory HMA, LLC's, Interrogatories.

RESPONSE NO. 16: See medical files.

REQUEST NO. 17: Any and all medical learned treatises to be used in direct examination, pursuant to MRE 803(18).

RESPONSE NO. 17: None at this time. Plaintiff may supplement.

REQUEST NO. 18: Any and all documents which you have obtained from any of the Defendants prior to this suit.

RESPONSE NO. 18: See attached hospital file.

REQUEST NO. 19: Any and all discoverable documents which relate to the allegations contained in Paragraph 18 of your Complaint, specifically including each separate allegation contained therein.

RESPONSE NO. 19: See attached medical records.

REQUEST NO. 20: Any and all discoverable documents which relate to the allegations contained in Paragraph 19 of your Complaint, specifically including each separate allegation contained therein.

RESPONSE NO. 20: None. Will be proven by expert testimony.

REQUEST NO. 21: Any and all discoverable documents which relate to the allegations contained in Paragraph 20 of your Complaint, specifically including each separate allegation contained therein.

RESPONSE NO. 21: None. Will be proven by expert testimony.

REQUEST NO. 22: Any and all discoverable documents which relate to the allegations contained in Paragraph 21 of your Complaint, specifically including each separate allegation contained therein.

RESPONSE NO. 22: None.

REQUEST NO. 23: Any and all discoverable documents which relate to the allegations contained in the second Paragraph 20 of your Complaint, specifically including each separate allegation contained therein.

RESPONSE NO. 23: See attached tax records. Other damages will be proven by testimony.

REQUEST NO. 24: Any and all discoverable documents which relate to the allegations contained in the second Paragraph 21 of your Complaint, specifically including each separate allegation contained therein.

RESPONSE NO. 24: None. Will be proven by testimony.

REQUEST NO. 25: Any and all discoverable documents which relate to the allegation that "your right arm symptoms were the result of the interscalene block administered by Dr. Murphree."

RESPONSE NO. 25: See Dr. Turba's file.

REQUEST NO. 26: Any and all discoverable documents which relate to your claim that this Defendant (anyone you contend is an agent, representative or employee of this Defendant) violated the applicable standard of care or was, in anyway, negligent.

RESPONSE NO. 26: None. Will be proven by expert testimony.

REQUEST NO. 27: If you are claiming damages for past, present and/or future lost wages or for loss of wage earning capacity, please produce a copy of your state and federal income tax returns, whether individually, jointly or otherwise, for tax years 2002 to the present.

RESPONSE NO. 27: See attached Tax Returns for years 2002 - 2009.

REQUEST NO. 28: Any and all documents supporting Plaintiff's claim for damages to the extent not herein otherwise requested.

RESPONSE NO. 28: None. Only documents attached hereto.

Respectfully submitted this, the 23 day of November, 2010.

JERRY BOWEN AND CHERYL BOWEN,
PLAINTIFFS

BY: 

NED "TRES" MCDONALD, III

MCDONALD LAW FIRM, PLLC
111-D TOWN CREEK DRIVE
SALTILLO, MS 38866
TELEPHONE: 662-869-0011
FAX: 662-869-0021

CERTIFICATE OF SERVICE

I, NED "TRES" MCDONALD, III, counsel for Plaintiffs, Jerry Bowen and Cheryl Bowen, do hereby certify that I have this day mailed, by United States Mail, a true and correct copy of the above and foregoing to:

Mr. Louis Baine, Esquire
Page Kruger & Holland
Suite 200- 10 Canebrake Blvd
Flowood, Mississippi 39232

Mark Caraway, Esq.
Wise Carter
P.O. Box 651
Jackson, MS 39205-0651

THIS, the 23 day of November, 2010.


NED "TRES" MCDONALD, III

STATE OF MISSISSIPPI

COUNTY OF Lee

Personally appeared before me, the undersigned authority in and for the state and county aforesaid, Jerry Bowen, who, after being first duly sworn by me, states on his oath that the facts and matters contained in the above and foregoing are true and correct at therein state to the best of his knowledge and belief.

Jerry Bowen
JERRY BOWEN

SWORN TO AND SUBSCRIBED BEFORE ME, this the 22 day of
November, 2010.

Melinda Walls
NOTARY PUBLIC



My Commission Expires: